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|  | APOLLO HOSPITALS, SECUNDERABAD | | PRE – 01&2 |
| | | | Issue: C |
| | POLICY ON PATIENT AND FAMILY RIGHTS | | Date: 06-01-2017 |
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| PREPARED BY: | | APPROVED BY: | |
| Dy. Medical Superintendent | | Chief Executive Officer | |


1.0 Purpose:

- 1.1 To assure that the basic rights of human being for freedom of expression, decision, and action, concern for personal dignity and human relationships are preserved for all patients.
- 1.2 To define policies to guide caregivers, in protecting those who are vulnerable especially the elderly and children from abuse and assault and their possession from theft and loss.

2.0 Scope:

- 2.1 To create awareness among caregivers and patients about patients/family rights, and to inform patients about their responsibilities during the course of treatment in the Hospital.
- 2.2 To train staff members of the hospital to understand and respect the patient's belief and values and to provide considerate and respectful care that protects the dignity of the patient.

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3.0 Policy:

3.1 Clients shall be provided impartial access to treatment or relevant information that are available and medically indicated, regardless of race, creed, sex, nationality, region, gender and financial capability.

3.1.1 Patient /family member shall be provided information regarding payment made/to be made to the hospital on an ongoing basis.

3.2 Every effort shall be made to assist the patient in effective communication, regardless of any language barrier /hearing/speech/vision impairment.


3.2.1 Interpreters shall be provided when necessary

3.3 All patients/surrogate decision makers shall be informed of their rights and responsibilities for the review and resolution of their concerns and complaints.

3.3.1 All patients shall be encouraged to ask questions

3.3.2 Asking questions or voicing concerns shall not condition the provision of care or otherwise discriminate against the individual.

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3.4 The hospital shall educate its employees, physicians and all other caregivers about Patient Bill of Rights and urge compliance therewith.

3.5 Psychological and spiritual needs of the patient shall be met through facility resources or through arrangements with community resources. A list of religious leaders shall be provided to all nursing stations.


3.7 An In-patient guide shall be handed over at the time of admission mentioning all necessary information and also the rights and responsibilities as a patient of Apollo Hospitals, Secunderabad. The book shall be available in English and Telugu. When a patient/attendant is unable to read the material they shall be explained appropriately the contents of the book.

4.0 Procedure:

4.1 Apollo Hospitals, Secunderabad shall recognize and accept each patient and his family with their psychosocial, cultural and spiritual values for more effective patient care and greater satisfaction for the patient, physician, and the organization.


4.2 Patients' need for privacy shall be upheld at all points of contact especially during examinations and procedures.

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- 4.2.1** Confidentiality shall be maintained during all kinds of personalized patient related discussion. If the patient prefers to have the family member present during discussions and examinations they shall be allowed to do so.
- 4.3** All caregivers shall be sensitized regarding patient right for privacy (audio, visual) during physical examination and discussions. All employees shall be trained and educated in identifying the needs, values, beliefs and rights of the patient at the time of induction into the organization.
- 4.4** It shall be the responsibility of the treating physician to adequately inform and educate patient/family about the illness, proposed treatment and cost of treatment in the language understood by them.
- 4.5** Patient has the right to know the identity and professional status of the caregiver and his/her primary clinician responsible.
- 4.6** Patient shall have the right to choose the room /bed of his choice depending on availability; change of room is also made possible upon request.
- 4.7** To protect the privacy of very important people (VIP) or of those under security threat shall be admitted under an alias name which shall be provided only to the

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MS and direct care givers. VIPs shall include but not limit to the Prime Minister and President of India, President, Prime Minister and heads of other countries.

4.8 The organization shall have a system of safekeeping of personal belongings of the patient when requested for by the patient or the family. The belongings such as extra cash or ornaments shall be sealed in a cover and deposited with the security department.

4.8.1 Hospital shall have its policy and systems in place on restricting visitors, visiting timings shall be mentioned in the in-patient guide book and displayed in prominent locations, one family member shall be provided with a pass to stay with the patient, in case of terminally ill patients additional pass shall be arranged on request by the treating doctor/assignee.


4.8.2 The patient rooms are provided with cupboards to ensure their belonging are not stolen or misplaced.

4.8.3 In the event of emergencies when the patient is not accompanied by an attendant, the possessions of the patient shall be sealed and handed over to the security department for safekeeping.

4.8.4 In the event of theft or loss of property the matter shall be reported to the security.

4.9 The hospital shall ensure patient / attendant safety against abuse/assault.

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4.9.1 The hospital shall encourage an attendant to be available 24 hours with the patients in the wards or in the rooms.


4.9.2 The hospital shall have security personnel stationed at strategic locations of the hospital. This helps to monitor and restrict any entry of unauthorized persons. Visitors shall be allowed only during visiting hours. Security personnel shall take rounds after the visiting hours, to ensure no unauthorized persons are loitering in and around the hospital.

4.9.3 Vulnerable children, disabled individuals and the elderly shall be identified by a yellow colour wrist band and a “Patient First” sign at the bedside to ensure that they receive appropriate care and attention.

4.10 Only authorized individuals have the right to access to medical records of patients. (Treating doctor/assignee, resident doctor, nurses, dieticians, physiotherapist and other individuals involved in treatment or monitoring of quality.)

4.10.1 Patient information shall be documented in the individual’s case files, which are not open to the public. All the patient information shall be maintained in the department of Medical Records.

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4.10.2 Copies of medical records shall not be given to patients or their attendants without prior permission from the Dy. M.S.

4.11 Patient and their family have right to accept or refuse any treatment: It shall be the responsibility of the treating physician to reinforce the importance of continuing treatment; still if the patient / surrogate decision maker decides to discontinue treatment or discharge the patient against medical advice, it shall be documented in the case file and a consent is obtained stating the refusal of treatment if the decision has major implication on progress of the patient.

4.12 The patient/ family member shall be informed regarding the plan of treatment at each step and are taken into confidence before any change in plan is initiated.

4.13 The patient and family shall have individual interactive sessions with the doctors and social workers to seek further clarification of the course of treatment, reasons for performing of the test etc whenever necessitated.

4.14 The organization supports the patient's right to appropriate assessment and management of pain.

4.15 The hospital shall support the patient's right to respectful and compassionate care at the end of life. The hospital shall ensure that the care is respectful for the dying patient and the family shall be extended necessary help.

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